

OFFICIAL COMMUNICATION
PLEASE DELIVER DIRECTLY TO EXAMINER NGUYEN. THANK YOU.

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

ATTORNEYS AT LAW

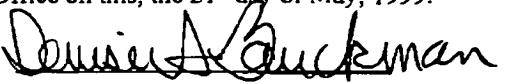
1100 New York Avenue, N.W., Suite 600
 Washington, DC 20005-3934

RECEIVED

MAY 24 1999

Facsimile Cover Sheet

MATRIX CUSTOMER
 SERVICE CENTER

urgent <input checked="" type="checkbox"/>	return reply requested <input type="checkbox"/>	original will be sent as confirmation <input type="checkbox"/>	
DATE	May 21, 1999	PHONE NO.	(703) 308-8724
PAGES	16 (including this cover sheet)		
TO/ATTN	Examiner Dave Nguyen U.S. Patent and Trademark Office - Group 1633		
FROM	Robert W. Esmond, Esq. <i>RWE</i>		
RE	U.S. Utility Patent Application Appl. No. 08/849,117; § 102(e) Date: August 1, 1997 For: Vectors for Tissue-Specific Replication Inventors: Hallenbeck <i>et al.</i>		
YOUR REF			
OUR REF	1136.0020002/RWE		
MESSAGE	<u>Certification of Facsimile Transmission</u> <i>I hereby certify that the following Amendment and Reply Under 37 C.F.R. § 1.116; Petition For Extension of Time Under 37 C.F.R. § 1.136(a)(1) (in duplicate); Notice of Appeal From the Examiner to the Board of Patent Appeals and Interferences - Large Entity (in duplicate); and Fee Transmittal (Form PTO/SB/17) (in duplicate); were facsimile transmitted to the U.S. Patent and Trademark Office on this, the 21st day of May, 1999.</i> 		

This message is intended for the exclusive use of the individual or entity to which it is addressed. The message may contain information that is privileged, confidential, or otherwise exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, copying or use of this communication in any way is strictly prohibited. If you have received this communication in error, please call us collect immediately, and return the original message to us at the above address via the U.S. Postal Service.

If any portion of this transmission is not received clearly or in full, contact us at any of the following numbers:

TELEPHONE NUMBER	:	(202) 371-2600
INTERNET ADDRESS	:	RESMOND@SKGF.COM
FACSIMILE NUMBER	:	(202) 371-2540

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTALPatent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$680.00)

Complete if Known

Application Number	08/849,117
Filing Date	August 1, 1997
First Named Inventor	Paul L. Hallenbeck et al.
Examiner Name	Nguyen, D.
Group / Art Unit	1633
Attorney Docket Number	1138.0020002/RWE

METHOD OF PAYMENT (check one)1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number **19-0036**
 Deposit Account Name **Sterne, Kessler, Goldstein & Fox P.L.L.C.**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed: Check No. _____ Money Order Other

*Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 19-0036.

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code (\$)	Entity Fee Code (\$)	Small Fee Code (\$)	Entity Fee (\$)	Fee Description	Fee Paid
101	760	201	380	Utility filing fee	
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	760	208	380	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)-0-

2. EXTRA CLAIM FEES

Extra	Fee from below	Fee Paid			
Total Claims - 20** =	X =				
Indep. Claims - 3** =	X =				
Multiple Dependent Claims =					
** or number previously paid, if greater. For Reissues, see below					
Large Fee Code (\$)	Entity Fee Code (\$)	Small Fee Code (\$)	Fee Description	Fee Paid	
103	18	203	9	Claims in excess of 20	
102	78	202	39	Independent claims in excess of 3	
104	260	204	130	Multiple dependent claim	
108	78	209	39	**Reissue Independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)-0-

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,620	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	380
117	870	217	435	Extension for reply within third month	
118	1,360	216	880	Extension for reply within fourth month	
128	1,850	225	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	300
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to Institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(b))	
149	760	249	380	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify):

Other fee (specify):

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)-680.00

SUBMITTED BY

Submitted By		Complete (if applicable)		
Typed or Printed Name	Signature	Reg. Number		
Robert W. Esmond	Robert W. Esmond	32,893		
			Deposit Acct User ID	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.